## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10749900

(Column 1) (Column 2)								SMALL ENTITY TYPE			OR SMALL ENTITY		
TOTAL CLAIMS			(21		(Coju	(Column 2)				OR 1			
TOTAL CLAIMS			3/					RATE	FEE	4	RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			69/ mir	nus 20=	* //			X\$ 9=		OR	X\$18=	191	
INDEPENDENT CLAIMS			7 minus 3 = * 4			(		X43=		OR	X86=	444	
MU	JLTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If	the difference	e in column 1 is	less than zero, enter "0" in column 2					TOTAL		OR	TOTAL	1312	
CLAIMS AS AMENDED - PART II										4	OTHER	THAN	
		(Column 1)		(Column 2)				SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		ΟŖ	X\$18=		
	Independent	<u> </u>				=		X43=		OR	X86=		
Ľ.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
			•				L	TOTAL		اما	TOTAL		
							F	ADDIT. FEE		OR	ADDIT. FEE		
		(Column 1)	·	(Colun		(Column 3)	ı		ADDI	1		ADDI	
AMENDMENT B		REMAINING AFTER AMENDMENT	·	NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total ·	*	Minus	**		=		X\$ 9=		OR	X\$18=		
MEI	Independent	*	Minus	***		=		X43≒		OR	X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								<del></del>				
						•	·L	+145=		OR	+290=		
							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	nn 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	;	HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total '	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	Ħ	X43=			X86=		
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7.55		
								+145=		OR	+290=	;	
**	f the "Highest Nui	mn 1 is less than th mber Previously Pa	id For IN THIS	S SPACE is	less than	1 20, enter "20."	A	TOTAL DDIT. FEE		or ,	TOTAL ADDIT. FEE		
		mber Previously Pa ther Previously Paid							ropriate hov	in coli	umn 1		